

(1) OWNER: Name **MABANA SHORES-LEOCUMMINGS** Address **3193 S RICE COURT CAMANO ISLAND, WA 98292-3035/10 P**

(2) LOCATION OF WELL: County **SNOHOMISH** - SE 1/4 SW 1/4 Sec 10 T 30 N., R 3E WM

(2a) STREET ADDRESS OF WELL (or nearest address) **SOUTHWEST SIDE CAMANO ISL**

(3) PROPOSED USE: **DOMESTIC**

(4) TYPE OF WORK: Owner's Number of well (If more than one) **NEW WELL** Method: **ROTARY**

(5) DIMENSIONS: Diameter of well **8** inches
Drilled **129** ft. Depth of completed well **120** ft.

(6) CONSTRUCTION DETAILS:
Casing installed: **8** " Dia. from **1.5** ft. to **105.5** ft.
WELDED " Dia. from ft. to ft.
" Dia. from ft. to ft.

Perforations: **NO**
Type of perforator used
SIZE of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

Screens: **YES**
Manufacturer's Name **HUSTEN**
Type **STAINLESS STEEL** Model No. **6' RISER**
Diam. **6** slot size **16** from **10** ft. to **120** ft.
Diam. **6** slot size **0** from **99** ft. to **105** ft.

Gravel packed: **YES** Size of gravel **10/20**
Gravel placed from **100** ft. to **120** ft.

Surface seal: **YES** To what depth? **20** ft.
Material used in seal **PUDDLING CLAY**
Did any strata contain unusable water? **NO**
Type of water? Depth of strata ft.
Method of sealing strata off

(7) PUMP: Manufacturer's Name Type H.P.

(8) WATER LEVELS: Land-surface elevation
Static level **88** ft. below top of well Date **12/14/90**
Artesian Pressure lbs. per square inch Date
Artesian water controlled by

(9) WELL TESTS: Drawdown is amount water level is lowered below static level.
Was a pump test made? **NO** If yes, by whom?
Yield: gal./min with ft. drawdown after hrs.

Recovery data
Time Water Level Time Water Level Time Water Level

Date of test / /
Bailer test **2.5** gal/min. **11** ft. drawdown after **2** hrs.
Air test gal/min. w/ stem set at ft. for hrs.
Artesian flow g.p.m. Date
Temperature of water Was a chemical analysis made? **NO**

(10) WELL LOG
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change in formation.

MATERIAL	FROM	TO
TOPSOIL	0	1
BROWN SAND	1	9
BROWN SILTY SAND	9	15
BROWN SILTY SAND & GRAVEL	15	75
BROWN SAND & GRAVEL	75	100
BROWN CLAY	100	101
BROWN SILTY SAND & WATER	101	115.5
GRAY CLAY	115.5	116
GRAY SAND & WATER	116	119
GRAY CLAY	119	122
GRAY SAND & CLAY	122	

DEPT. OF ECOLOGY

Work started **12/12/90** Completed **12/14/90**

WELL CONSTRUCTOR CERTIFICATION:
I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME **HAYES DRILLING, INC.**
(Person, firm, or corporation) (Type or print)

ADDRESS **556 ERSWIG RD. BOW, WA**

(SIGNED) *Steve Dittman* License No. **762**

Contractor's Registration No. **HAYESDI106J5** Date **12/27/90**